

Reset Form

**DISCLOSURE SUMMARY PAGE****COMMITTEE NAME** (Must be same as on Statement of Organization)

Joe Morr for School Board

IMPORTANT: Indicate by # type of committee you are reporting for: ☐( 1 )Statewide/Legislative/Judge Standing for Retention Candidate ( 2 )State PAC ( 3 )State Party  
( 4 )County Central Committee ( 5 )County Candidate ( 6 )City Candidate ( 7 )School Board or Other Political  
Subdivision Candidate ( 8 )County PAC ( 9 )City PAC ( 10 )School Board or Other Political Subdivision PAC  
( 11 ) Local Ballot Issue**CANDIDATE COMMITTEES ONLY:**Candidate Name  
Joe Morr

Political Party (if applicable)

Office Sought  
School Board

District (if Senate or House)

~~DEC - 7 - 2005~~**FORM****DR-2**

(Rev. 12/2005)

DISCLOSURE  
REPORT**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A FINAL

(report date)

REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR.

Indicate by # ☐☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

09/13/2005

County & Local Committees, enter County in  
which Election is held  
Polk**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.)

\$ 300.54

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below).....

50.10

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .....\$ 350.64

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) .....

350.64

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report balance must  
be zero) (Attach DR-3).....

\$ 0.00

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D).....\$**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) .....\$

27.50

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) .....\$**CONSULTANT BREAKDOWN** (Schedule G Attached?)YES ☒ NO**CANDIDATE COMMITTEES ONLY:****VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

# CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

JOE MORR FOR SCHOOL BOARD

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
09.06.05	ID# CK#	MARILYN J. DENNLER 130 NW GEORGETOWN BLVD ANKENY, IA 50023 UNIT 2		\$ 25.00	
09.08.05	ID# CK#	JOYCE E. LUNDSTROM 2029 NW HICKORY LANE ANKENY, IA 50023		25.00	
12.01.05	ID# CK#	UNITE MIZED		.10	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

\$50.10

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

JOE MORR FOR SCHOOL BOARD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09.07.05	ID# CK# 1009	JOE MORR 1225 SW FRANKLIN CT. ANKENY, IA 50023	PIZZA 4 YOUTHS 5 ADULTS DISTRIBUTING FLIERS	\$36.16
09.07.05	ID# CK# 1010	THE COPY SHOP 225 SE ORALABO RD ANKENY, IA 50021 SUITE 101	1 LRG SIGN 50 LAMINATED SIGNS	193.45
09.22.05	ID# CK# 1011	ANKENY AREA BOX 1111 HISTORICAL SOCIETY 301 SW THIRD ANKENY, IA 50023	NON-PROFIT	121.03
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

\$250.64

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

JOE MORRIS FOR SCHOOL BD.

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
09.06.05	STEPHANIE LUIKEN 1414 N.W. MAPLE ST ANKENY, IA 50023		TWO YARD SIGNS	\$ 20.00	
09.07.05	SNYDER & ASSOCIATES STEVE RHE 501 S W ORALABOR RD ANKENY, IA 50023		ONE BUNDLE LATHE	7.50	

SUB-TOTAL \$

TOTAL (if last  
page of this  
schedule)

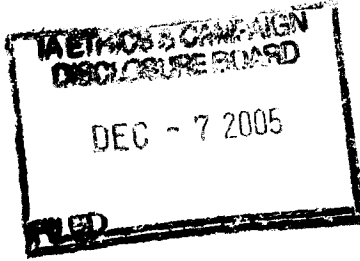
\$  
27.50

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule E)



P.O. Box 1800  
Saint Paul, Minnesota 55101-0800  
00543 TRN 56918SRXP X ST01



CLEADYTHE W BUEHLER  
409 SW WALNUT ST  
ANKENY IA 50023-3039



JOE MORR FOR SCHOOL BOARD

## Uni-Statement

Account Number:  
1 964 7186 0045  
Statement Period:  
Oct. 7, 2005  
through  
Nov. 4, 2005

Page 1 of 1



To Contact U.S. Bank

By Phone:

1-800-US BANKS  
(1-800-872-2657)

TDD:

1-800-685-5065

Internet:

usbank.com

## NEWS FOR YOU

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## INFORMATION YOU SHOULD KNOW

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## FREE CHECKING WITH INTEREST

Member FDIC

Account Number 1-964-7186-0045

U.S. Bank National Association

### Account Summary

Beginning Balance on Oct. 7	\$	0.00
Ending Balance on Nov. 4, 2005	\$	0.00

### Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Nov. 3	Account Closed		\$ 0.00-
Total Other Withdrawals			\$ 0.00-

### Balance Summary

Date	Ending Balance
Nov. 3	0.00

Balances only appear for days reflecting change.

The wait is over! Now the Cash Bonus Visa® Check Card, part of the Checking That Pays® reward program, lets you redeem your cash reward whenever you want! Visit [usbank.com/rewards](http://usbank.com/rewards) for details.